

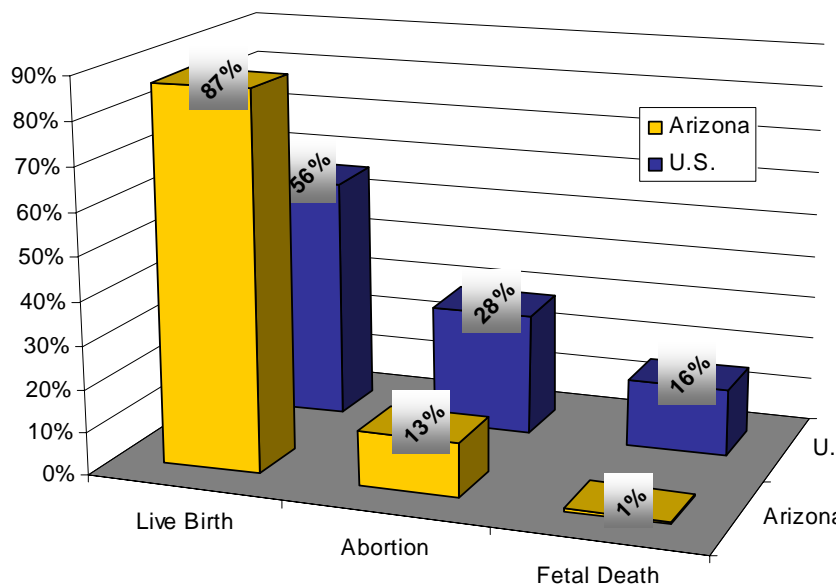
## TEEN PREGNANCY IN ARIZONA, 2006

### FACT SHEET

#### OVERVIEW

- In 2006, 14,676 females age 15 to 19 became pregnant in Arizona.
- 12,746 of these pregnancies resulted in live births (86.8%), 1,850 pregnancies were aborted (12.6%) and 80 pregnancies resulted in fetal deaths (.6%).
- The number of pregnancies that resulted in live births in Arizona (86.8%) is notably higher than the national average (56.1%).

#### Teenage Pregnancy Outcomes



Note: U.S. data is from 2002 and provided by the National Center for Health Care Statistics' report: "Recent Trends in Teenage Pregnancy in the United States, 1990-2002."

- Arizona's teenage pregnancy rate in 2006 was 68.7 per 1,000 females age 15 to 19, which is higher than the previous year's (2005) rate of 65.6 per 1,000 females.
- Despite the recent increase, the teenage pregnancy rate has actually been on the decline over the past decade; in fact, it has decreased by 24.8% below 1996 levels.
- The majority of the decline in teen pregnancy rates (as much as 86%) is attributed to improved contraceptive use among sexually active teens and higher proportions of teens choosing to delay sexual activity.<sup>1</sup>

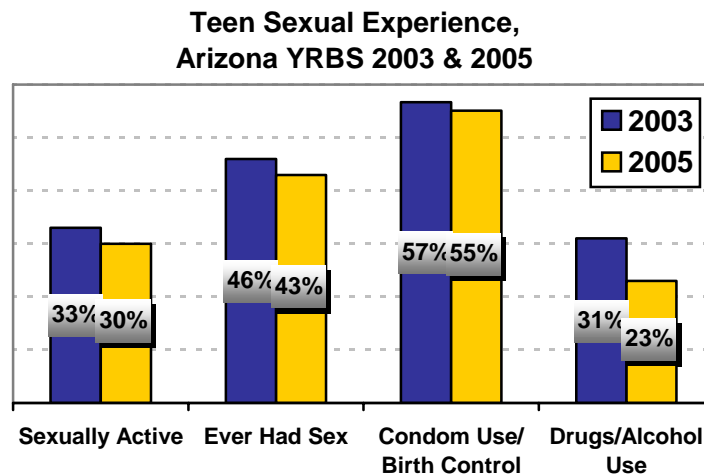
<sup>1</sup> Santelli J et al. Explaining recent declines in adolescent pregnancy in the United States: the contribution of abstinence and improved contraceptive use. American Journal of Public Health 2007; 97: 3.

### WHY ARE RATES DECLINING SINCE THE 1990s?

- Nationally, the rate of teens using condoms and contraceptives has increased. National statistics indicate that males and females whose first intercourse occurred in the mid-1990s through 2002 are much more likely to be protected at first intercourse than their counterparts having first sex before 1990. About 3 out of 4 teens used a method of contraception at their first intercourse. About 91% of males and 83% of females used a method last time they had intercourse.<sup>2</sup>
- The percentage of teens having sex has also dropped. In the United States, the percentage of males age 15-19 who ever had sexual intercourse declined between 1995 and 2005 from 54% to 47%. Teenagers are also delaying sex until later in life. In 2002, 13% of never-married female teens had had sex before age 15 compared to 19% in 1995; 15% of males had done so compared to 21% in 1995.<sup>3</sup>



- Results from the 2005 Arizona Youth Risk Behavior Survey<sup>4</sup> show that both the percentage of students who have ever had sex and the percentage of students who are currently sexually active have decreased since 2003.



- A larger decrease was observed in the percentage of students who drank alcohol or used drugs prior to sexual intercourse; however the difference was not statistically significant. And while the percentage of students who reported using a condom or birth control decreased slightly from the 2003 survey, the difference was not large enough to be statistically significant.

<sup>2</sup> National Campaign to Prevent Teen Pregnancy (<http://www.teenpregnancy.org>).

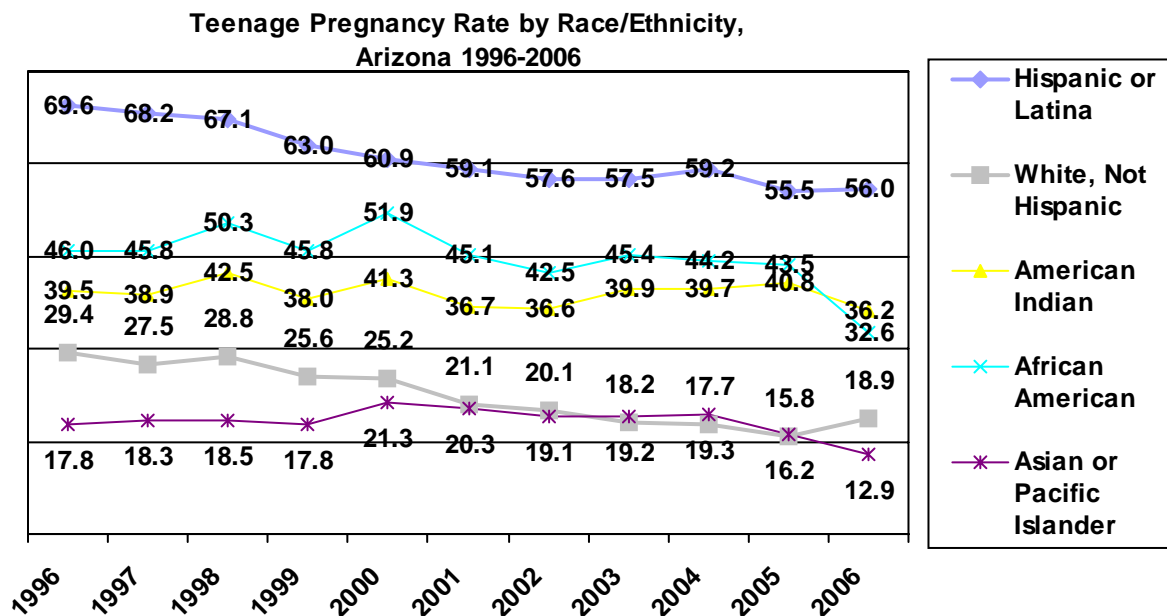
<sup>3</sup> *Ibid* (same source as above).

<sup>4</sup> Center for Disease Control, National Center for Chronic Disease Prevention and Health Promotion's Youth Online: Comprehensive Results (<http://www.cdc.gov/HealthyYouth/yrbs/>).

## DEMOGRAPHIC ANALYSIS

### *Race/Ethnicity*

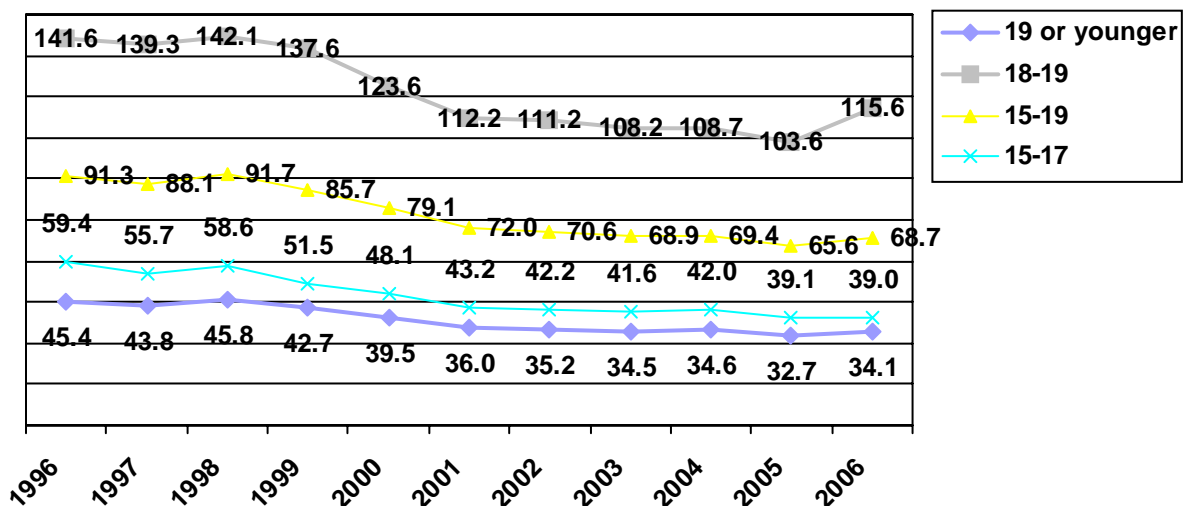
- In 2006, Hispanics or Latinos continued to have the highest teen pregnancy rate (56.0 per 1,000 females aged 19 and younger), followed by American Indian (36.2 per 1,000), African American (32.6 per 1,000), White, Not Hispanic (18.9 per 1,000) and Asian or Pacific Islander (12.9 per 1,000).
- The teen pregnancy rate for White, Not Hispanic females showed a sharp increase over the past year, from 15.8 per 1,000 females age 19 or younger in 2005 to 18.9 per 1,000 females in 2006.
- The teen pregnancy rate for Hispanic or Latinos stayed relatively stagnant over the past year while other groups showed a sharp decline. The largest decrease was for African Americans, whose pregnancy rate dropped from 43.5 per 1,000 females age 19 or younger in 2005 to 32.6 per 1,000 females in 2006 – the lowest level recorded over the past decade.



### *Age Groups*

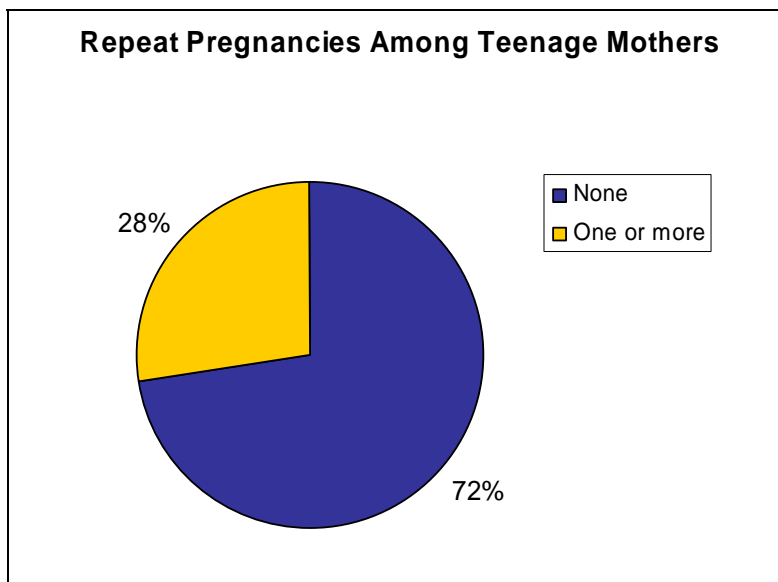
- Nearly two-thirds of all teen pregnancies (64.2%) occur among 18 to 19 year-olds; less than 2 percent (1.6%) occur among mothers that are 15 years or younger .
- The teen pregnancy rate for 18 to 19 year olds increased from 103.6 per 1,000 females in 2005 to 115.6 per 1,000 females in 2006 – its highest level since 2000.
- The teen pregnancy rate for all other age groups either stayed stagnant or showed a slight increase from 2005 to 2006.

**Teenage Pregnancy Rate by Age Group,  
Arizona 1996-2006**



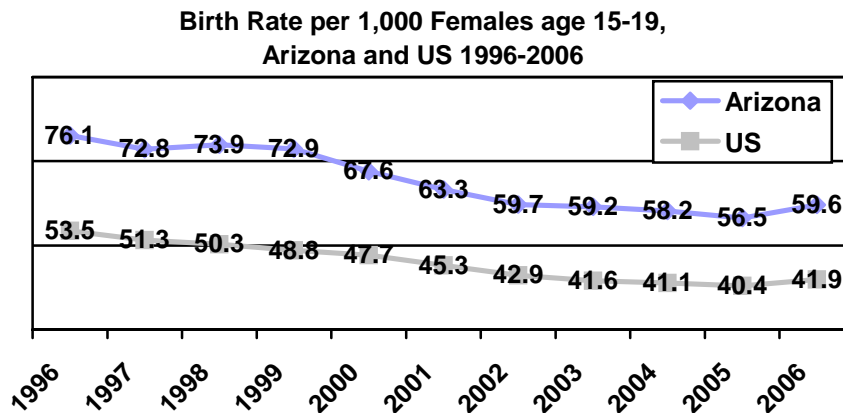
#### SUBSEQUENT BIRTHS TO TEENS

- 3,511 out of 12,746 or more than 1 in 4 teenage mothers (age 15-19) who gave birth in 2006 had experienced previous pregnancies (see chart below).
- The rate of subsequent births to teenage mothers has remained relatively constant over the past decade (fluctuating between 28 and 30 percent; data not shown).



### TEENAGE BIRTHRATE COMPARISON

- In 2006, Arizona experienced its first increase in the teen birth rate<sup>5</sup> in nearly a decade, from 56.5 per 1,000 females age 15-19 in 2005 to 59.6 in 2006. However, the teen birth rate has actually dropped by 21.7 percent since 1996.
- Arizona's teen birth rate is consistently higher than the nation's, as displayed in the figure below. In 2006, Arizona's teen birth rate was 42.2% higher than that of the nation's<sup>6</sup>.



Note: U.S. data from provided by the National Campaign to Prevent Teen Pregnancy's report "Teen Birth Rates in the United States" (available at [teenpregnancy.org](http://teenpregnancy.org)).

### WHAT ARE THE CONSEQUENCES OF TEEN PREGNANCY?

- Research shows a strong connection between teen pregnancy and a number of negative consequences for mothers, fathers, and their children.<sup>6</sup>
  - Teen mothers are less likely to complete high school: only one-third receive a high school diploma and a mere 1.5% have a college degree by age 30.
  - Teen mothers are more likely to end up on welfare: nearly 80 percent of unmarried teen mothers end up on welfare.<sup>7</sup>
  - The children of teenage mothers have lower birth weights, are more likely to perform poorly in school, and are at greater risk of abuse and neglect.
  - The sons of teen mothers are 13 percent more likely to end up in prison while teen daughters are 22 percent more likely to become teen mothers themselves.

<sup>5</sup> The teen birth rate one of three general indicators of teenage pregnancy – the other two being spontaneous terminations of pregnancies (fetal deaths or stillbirths) and induced terminations of pregnancies (abortions) – and used here for comparative purposes with national trends.

<sup>6</sup> See Maynard, R.A., (Ed.). (1996). Kids Having Kids: A Robin Hood Foundation Special Report on the Costs of Adolescent Childbearing, New York: Robin Hood Foundation. Information also available at: <http://www.teenpregnancy.org/resources/data/genlfact.asp>.

<sup>7</sup> Calculations based on the National Longitudinal Survey of Youth (1979-1985) in Congressional Budget Office. (1990, September). *Sources of Support for Adolescent Mothers*. Washington, DC: Author.

### WHAT ARE THE PUBLIC HEALTH COSTS ASSOCIATED TEEN PREGNANCY?

- An analysis from the National Campaign to Prevent Teen Pregnancy shows that teen childbearing (teens 19 and younger) in Arizona cost taxpayers (federal, state, and local) at least \$252 million in 2004.
- Most of the costs of teen childbearing are associated with negative consequences for the *children* of teen mothers. In Arizona, in 2004, annual taxpayer costs associated with children born to teen mothers included: \$48 million for public health care (Medicaid and SCHIP); \$32 million for child welfare; \$43 million for incarceration; and \$88 million in lost tax revenue, due to decreased earnings and spending.
- The costs of childbearing are greatest for younger teens. In Arizona, the average annual cost associated with a child born to a mother 17 and younger is \$3,364.
- Between 1991 and 2004 there have been more than 158,300 teen births in Arizona, costing taxpayers a total of \$3.4 billion over that period.
- Because the teen birth rate in Arizona declined 25% between 1991 and 2004, an estimated \$101 million (in taxpayer's dollars) was saved in 2004 alone.
- Public health insurance (AHCCCS & IHS) paid for 82% of teen births in Arizona during 2005. In 2005, hospital stays of teens with pregnancy and delivery-related diagnoses resulted in total charges to AHCCCS/Medicaid of over \$94 million dollars.

### WHAT IS THE STATE OF ARIZONA DOING TO REDUCE TEEN PREGNANCY?

- Arizona has established a goal to reduce the pregnancy rate of 15-19 year olds by 20% between 2006 and 2015. ADHS integrates multiple strategies: abstinence education, comprehensive sex education projects, family planning and other collaborative efforts.
  - **Abstinence education** programs will serve 20,708 youth in curriculum-based programs and 439 youth in youth development programs in 2006-2007. The program will also be able to reach 1,769 parents. Abstinence education is funded by federal and state dollars totaling about \$2.5 million this year. Abstinence education focuses on younger teens, parent education, and youth development. Common elements of education include goal-setting, refusal skills, communication skills, healthy relationships, and consequences of teen pregnancy such as STDs, potential for dropping out of school, and living in poverty. Parent education focuses on learning about teen sexual behavior, the impact of the media on teens, and how to communicate with your children. Currently 12 projects in 10 counties are funded.

- **Comprehensive sex education projects** are funded through lottery dollars (Proposition 203). The intent of the funds is to provide for the development and implementation of community based, multi-faceted education and youth development programs that address the problems of teen pregnancy and sexually transmitted infections among youth. Funded programs must employ research based strategies that have been demonstrated to be effective or those that have been shown to have promise in reducing the incidence of sexually transmitted infection among youth and reducing the rate of teen pregnancy. All funded programs are in the early stages of development and implementation.

Fourteen counties health departments are funded to implement programs. The major target population of these programs is to work with youth who are in detention or on probation. Two community based programs are funded who are working with the prevention of second pregnancies and other higher risk youth. In partnership with the Division of Behavioral Health Services five community based behavioral health providers have been given funding to integrate teen pregnancy prevention messaging into their other prevention programs. These programs are being offered to Native American Youth, Hispanics, and charter schools youth in addition to other youth receiving prevention services.

Programming for both parents and youth at funded on the Navajo Reservation, Ft. McDowell, Colorado River, and Tohono O'Odham Reservations.

- **Parent Education** programs are funded as part of many of the abstinence education contracts as well as the comprehensive contracts. In addition, four community based agencies and two counties have programs specifically targeting parents. The programs are for parents/caregivers/foster parents of school aged children ages 6-18 with an emphasis on providing education which includes the following topic areas: 1) development and practical application of parent/child communication skills, 2) risk and protective factors, 3) the consequences of unhealthy risk behaviors, 4) the benefits of healthy behaviors, 5) information on primary and secondary prevention of teen pregnancy and sexually transmitted diseases, 6) growth and development of children and adolescents; and 7) the exploration and discussion of parental views regarding sex, love and healthy relationships with others.

The Parent Education Services Program is not intended to promote specific approaches with providing parent education. Rather, the intention is to support parents in improving

*their ability to communicate their own parental views to their youth as well as enhance parental knowledge and understanding of the healthy growth and development of children and adolescents through the discussion of all of the above topic areas.*

*Four programs will be funded in early 2008.*

- **Family planning** services are provided in clinics located in 11 county health departments and the Maricopa Integrated Health Systems' Maryvale Clinic . Family planning clinics are funded by the federal Maternal and Child Health Services Block Grant dollars. There are 24 clinic sites serving 5,580 clients. Approximately 22 percent of the clients served are teens.
  
- **Collaborative efforts** include participation in the Interagency Workgroup on Teen Pregnancy and STD prevention. In addition, the Governor's Commission on the Health Status of Arizona Women and Families has established a subcommittee on teen pregnancy to identify strategies and collaborative efforts to address the issue. This commission is supported by the Title V Maternal and Child Health Block Grant. In conjunction with the Department of Education we are developing and youth advisory council to provide input on services for youth.